10/814/125 Secret 2/22/07

d his

(FILE 'HOME' ENTERED AT 14:28:40 ON 21 FEB 2007)

FILE 'BIOSIS, CAPLUS, EMBASE, MEDLINE, JAPIO' ENTERED AT 14:29:03 ON 21 FEB 2007

	FEB 2007	
L1		S (IGG ANTIBOD?)
L2		S L1 AND (PLATELET ACTIVATING FACTOR)
L3	16	DUPLICATE REMOVE L2 (24 DUPLICATES REMOVED)
L4	147	S L1 AND (CARDIOVASCULAR DISEASE)
L5	1	S L3 AND L4
L6	69	DUPLICATE REMOVE L4 (78 DUPLICATES REMOVED)
L7	12	S L6 AND HYPERTENSION?

=>

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ANSWER 5 OF 12 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN
AN
     1999:515799 BIOSIS
DN
     PREV199900515799
TТ
     Lack of association between seropositivity to Chlamydia pneumoniae and
     carotid atherosclerosis.
     Coles, Katie A. [Reprint author]; Plant, Aileen J.; Riley, Thomas V.;
ΑU
     Smith, David W.; McQuillan, Brendan M.; Thompson, Peter L.
CS
     Department of Public Health, University of Western Australia, Nedlands,
     WA, 6009, Australia
     American Journal of Cardiology, (Oct. 1, 1999) Vol. 84, No. 7, pp.
SO
     825-828. print.
     CODEN: AJCDAG. ISSN: 0002-9149.
DT
     Article
LΑ
     English
     Entered STN: 3 Dec 1999
ED
     Last Updated on STN: 3 Dec 1999
AΒ
     Since the Chlamydia pneumoniae (C. pneumoniae) - specific antibody was shown
     to be associated with acute myocardial infarction and chronic coronary
     heart disease, the role of C. pneumoniae in the etiology of
     cardiovascular disease has been studied by a number of
     groups. We investigated the association between the C.
     pneumoniae-specific antibody, measured by microimmunofluorescence, risk
     factors for cardiovascular disease, and
     atherosclerosis in a randomly selected urban population. Overall,
     immunoglobulin-G (IgG) seroprevalence to C. pneumoniae in this sample of
     1,034 subjects was 58%, whereas IgA seroprevalence was 32%. There was a
     decline in seropositivity with age for IgG but not IgA. Men were more
     likely than women to be IgG (66% vs 51%, chi-square p = 0.001) and IgA
     seropositive (36% vs 28%, chi-square p = 0.005). Current smokers had
     higher IgA seropositivity than nonsmokers (43% vs 30%). Those patients
     with a family history of cerebrovascular disease were more likely to have
     IgG antibody than those without (75% vs 57%, chi-square
     p= 0.007). Neither IgG nor IgA seropositivity was associated with the
     standard risk factors of hypertension, hyperlipidemia, or family
     history of ischemic heart disease, nor was seropositivity associated with
     carotid intima medial thickening (IMT) or atherosclerotic plaque as
     measured by carotid B-mode ultrasound. There was no difference between
     those participants who were IgG or IgA seropositive and seronegative in
     measurements of mean IMT, prevalence of abnormal IMT, and percentage with
     atherosclerotic plaque. In conclusion, although C. pneumoniae was
     associated with several risk factors for cardiovascular
     disease in a large cross-sectional population, we found no
     independent association between seroprevalence to C. pneumoniae and
     carotid atherosclerosis as measured by carotid IMT.
     Cardiovascular system - General and methods
     Blood - General and methods
                                   15001
     Immunology - General and methods
                                        34502
     Medical and clinical microbiology - General and methods
                                                               36001
TT
    Major Concepts
        Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection;
        Serology (Allied Medical Sciences)
    Diseases
TT
        carotid atherosclerosis: vascular disease
       Carotid Artery Diseases (MeSH)
IT
    Chemicals & Biochemicals
        immunoglobulin A: serum; immunoglobulin G: serum
ORGN Classifier
       Chlamydiaceae
                        07121
    Super Taxa
       Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;
       Microorganisms
    Organism Name
       Chlamydia pneumoniae: pathogen
```

Taxa Notes

```
ANSWER 5 OF 12 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN
AΝ
     1999:515799 BIOSIS
DN
     PREV199900515799
     Lack of association between seropositivity to Chlamydia pneumoniae and
TΤ
     carotid atherosclerosis.
     Coles, Katie A. [Reprint author]; Plant, Aileen J.; Riley, Thomas V.;
AU
     Smith, David W.; McQuillan, Brendan M.; Thompson, Peter L.
     Department of Public Health, University of Western Australia, Nedlands,
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     WA, 6009, Australia
     American Journal of Cardiology, (Oct. 1, 1999) Vol. 84, No. 7, pp.
SO
     825-828. print.
     CODEN: AJCDAG. ISSN: 0002-9149.
DT ·
     Article
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     English
     Entered STN: 3 Dec 1999
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     Last Updated on STN: 3 Dec 1999
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     disease in a large cross-sectional population, we found no
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     carotid atherosclerosis as measured by carotid IMT.
     Cardiovascular system - General and methods
     Blood - General and methods
     Immunology - General and methods
                                        34502
     Medical and clinical microbiology - General and methods
                                                               36001
TT
     Major Concepts
        Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection;
        Serology (Allied Medical Sciences)
TΤ
    Diseases
        carotid atherosclerosis: vascular disease
        Carotid Artery Diseases (MeSH)
IT
     Chemicals & Biochemicals
        immunoglobulin A: serum; immunoglobulin G: serum
ORGN Classifier
        Chlamydiaceae
                        07121
     Super Taxa
        Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;
       Microorganisms
    Organism Name
        Chlamydia pneumoniae: pathogen
    Taxa Notes
```

Bacteria, Eubacteria, Microorganisms

ORGN Classifier

Hominidae 86215

Super Taxa

Primates; Mammalia; Vertebrata; Chordata; Animalia

Organism Name

human: host, patient

Taxa Notes

Animals, Chordates, Humans, Mammals, Primates, Vertebrates

Bacteria, Eubacteria, Microorganisms

ORGN Classifier

Hominidae 86215

Super Taxa

Primates; Mammalia; Vertebrata; Chordata; Animalia

Organism Name

human: host, patient

Taxa Notes

Animals, Chordates, Humans, Mammals, Primates, Vertebrates

```
ANSWER 7 OF 12 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN
AN
     1994:33981 BIOSIS
DN
     PREV199497046981
TI
     Past infection by Chlamydia pneumoniae strain TWAR and asymptomatic
     carotid atherosclerosis.
     Melnick, Sandra L.; Shahar, Eyal; Folsom, Aaron R. [Reprint author];
ΑU
     Grayston, J. Thomas; Sorlie, Paul D.; Wang, San-Pin; Szklo, Moyses
     Div. Epidemiol., Sch. Public Health, Univ. Minnesota, 1300 South Second
CS
     St., Suite 300, Minneapolis, MN 55454-1015, USA
     American Journal of Medicine, (1993) Vol. 95, No. 5, pp. 499-504.
SO
     CODEN: AJMEAZ. ISSN: 0002-9343.
DT
     Article
     English
LA
ED
     Entered STN: 27 Jan 1994
     Last Updated on STN: 27 Jan 1994
     PURPOSE: To determine whether past infection by Chlamydia pneumoniae
AB
     strain TWAR is associated with asymptomatic atherosclerosis. Previous
     studies have linked this organism with symptomatic coronary heart disease.
     SUBJECTS AND METHODS: Between 1986 and 1989,15,800 men and women aged 45
     to 64 years were examined as part of the Atherosclerosis Risk in
     Communities Study, a prospective cohort study of atherosclerosis being
     conducted in 4 United States communities. The examination included B-mode
     ultrasonography of the carotid arteries and an assessment of
     cardiovascular disease risk factors. Carotid wall
     thickening (blood-intima to medial-adventitial interface) in the absence
     of clinical cardiovascular disease was considered
     evidence of asymptomatic atherosclerosis. In 1991, IgG
     antibody titers to TWAR were assayed by microimmunofluorescence in
     stored sera from 326 case-control pairs matched by age group, race, sex,
     examination period, and field center. A titer of 1:8 or higher was
     considered a positive TWAR antibody response. RESULTS: Seventy-three
     percent of atherosclerosis cases had serologic evidence of past TWAR
     infection versus 63% of controls (matched odds ratio 1.76; 95% confidence
     interval, 1.21 to 2.57). After adjustment for age, hypertension
     , diabetes, cigarette smoking, low-density lipoprotein cholesterol,
     high-density lipoprotein cholesterol, and education, the odds ratio for
     atherosclerosis was essentially unchanged at 2.00 (95% confidence
     interval, 1.19 to 3.35). The association was stronger for individuals
     aged 45 to 54 years than for those aged 55 to 64 years. CONCLUSION: There
     was a significant cross-sectional association between past TWAR infection
     and asymptomatic atherosclerosis. This organism may be a contributor to
     the pathogenesis of atherosclerosis.
     Pathology - Diagnostic
                              12504
     Pathology - Therapy
                           12512
     Cardiovascular system - Heart pathology
                                               14506
     Cardiovascular system - Blood vessel pathology
                                                      14508
    Medical and clinical microbiology - Bacteriology
ΙT
    Major Concepts
        Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection;
       Pathology
IT
    Miscellaneous Descriptors
       CORONARY HEART DISEASE; DIAGNOSIS; PAST INFECTION; PATHOLOGY; RISK
       FACTOR
ORGN Classifier
       Chlamydiaceae
                        07121
    Super Taxa
       Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;
       Microorganisms
    Organism Name
       Chlamydia pneumoniae
    Taxa Notes
       Bacteria, Eubacteria, Microorganisms
```

ORGN Classifier

Hominidae

86215

ANSWER 7 OF 12 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN 1994:33981 BIOSIS AΝ PREV199497046981 DN TI Past infection by Chlamydia pneumoniae strain TWAR and asymptomatic carotid atherosclerosis. ΑU Melnick, Sandra L.; Shahar, Eyal; Folsom, Aaron R. [Reprint author]; Grayston, J. Thomas; Sorlie, Paul D.; Wang, San-Pin; Szklo, Moyses Div. Epidemiol., Sch. Public Health, Univ. Minnesota, 1300 South Second CS St., Suite 300, Minneapolis, MN 55454-1015, USA American Journal of Medicine, (1993) Vol. 95, No. 5, pp. 499-504. SO CODEN: AJMEAZ. ISSN: 0002-9343. Article ידת English LA ED Entered STN: 27 Jan 1994 Last Updated on STN: 27 Jan 1994 PURPOSE: To determine whether past infection by Chlamydia pneumoniae AB strain TWAR is associated with asymptomatic atherosclerosis. Previous studies have linked this organism with symptomatic coronary heart disease. SUBJECTS AND METHODS: Between 1986 and 1989,15,800 men and women aged 45 to 64 years were examined as part of the Atherosclerosis Risk in Communities Study, a prospective cohort study of atherosclerosis being conducted in 4 United States communities. The examination included B-mode ultrasonography of the carotid arteries and an assessment of cardiovascular disease risk factors. Carotid wall thickening (blood-intima to medial-adventitial interface) in the absence of clinical cardiovascular disease was considered evidence of asymptomatic atherosclerosis. In 1991, IgG antibody titers to TWAR were assayed by microimmunofluorescence in stored sera from 326 case-control pairs matched by age group, race, sex, examination period, and field center. A titer of 1:8 or higher was considered a positive TWAR antibody response. RESULTS: Seventy-three percent of atherosclerosis cases had serologic evidence of past TWAR infection versus 63% of controls (matched odds ratio 1.76; 95% confidence interval, 1.21 to 2.57). After adjustment for age, hypertension diabetes, cigarette smoking, low-density lipoprotein cholesterol, high-density lipoprotein cholesterol, and education, the odds ratio for atherosclerosis was essentially unchanged at 2.00 (95% confidence interval, 1.19 to 3.35). The association was stronger for individuals aged 45 to 54 years than for those aged 55 to 64 years. CONCLUSION: There was a significant cross-sectional association between past TWAR infection and asymptomatic atherosclerosis. This organism may be a contributor to the pathogenesis of atherosclerosis. CC Pathology - Diagnostic 12504 Pathology - Therapy 12512 Cardiovascular system - Heart pathology 14506 Cardiovascular system - Blood vessel pathology 14508 Medical and clinical microbiology - Bacteriology IT Major Concepts Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection; Pathology IT Miscellaneous Descriptors CORONARY HEART DISEASE; DIAGNOSIS; PAST INFECTION; PATHOLOGY; RISK FACTOR Chlamydiaceae 07121 Super Taxa Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;

ORGN Classifier
Chlamydiaceae 07121
Super Taxa
Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;
Microorganisms
Organism Name
Chlamydia pneumoniae
Taxa Notes
Bacteria, Eubacteria, Microorganisms
ORGN Classifier
Hominidae 86215

Super Taxa
Primates; Mammalia; Vertebrata; Chordata; Animalia
Organism Name
human
Taxa Notes
Animals, Chordates, Humans, Mammals, Primates, Vertebra

Super Taxa
Primates; Mammalia; Vertebrata; Chordata; Animalia
Organism Name
human
Taxa Notes
Animals, Chordates, Humans, Mammals, Primates, Vertebra

```
ANSWER 3 OF 33 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN
     1997:68811 BIOSIS
DN
     PREV199799368014
     Association of chlamydial infection with cerebrovascular disease.
ΤI
     Wimmer, Martin L. J.; Strupp, Ruth Sandman; Saikku, Pekka; Haberl, Roman
ΑU
     L. [Reprint author]
     Dep. Neurology, Staadtisches Krankenhaus Muenchen-Harlaching,
CS
     Sanatorium-splatz 2, 81545 Munich, Germany
     Stroke, (1996) Vol. 27, No. 12, pp. 2207-2210.
SO
     CODEN: SJCCA7. ISSN: 0039-2499.
DT
     Article
     English
LΑ
ΕD
     Entered STN: 11 Feb 1997
     Last Updated on STN: 11 Feb 1997
     Background and Purpose: Recent studies suggest an association of coronary
AB
     heart disease and carotid atherosclerosis with Chlamydia pneumoniae
     infection. We investigated the frequency of chlamydial seropositivity and
     specific circulating immune complexes in patients with recent
     cerebrovascular disease. Methods: Specific antibodies to C. pneumoniae in
     serum were measured by the microimmunofluorescence test in 58 consecutive
     patients (aged 18 to 50 years) with ischemic infarction (n=39) or
     transient ischemic attacks (n= 19) and in 52 hospital control subjects
     without vascular disease, matched for sex, age, time, and locality.
     Results: Twenty-seven patients (46.6%) and 12 control subjects (23.1%) had
     raised IgA titers gtoreq 1:16 (P = .0.18). IgG titers gtoreq 1:32 were
     measured in 74.1% of the patients and 77% of control subjects (P=.623).
     Specific IgG antibodies in circulating immune
     complexes, which were isolated by polyethylene glycol precipitation, were
     elevated gtoreq 1:8 in 24.1% of the patients and 7.7% of control subjects
     (P=.047). With the use of a conditional logistic regression model, the
     odds ratios were 1.70 (95% confidence interval (CI), 1.13 to 2.58) for
     elevated IgA titers, 1.91 (95% Cl, 1.06 to 3.47) for the presence of
     immune complexes, and 1.96 (95% CI, 1.00 to 3.82) for the presence of both
     factors. After adjustment for the vascular risk factors
    hypertension, age, sex, and migraine, the odds ratios were 1.71 \,
     (95% Cl, 1.08 to 2.70), 2.00 (95% Cl, 1.07 to 3.76), and 2.20 (95% Cl,
     1.09 to 4.41), respectively. Conclusions: We conclude that chronic
     infection with C. pneumoniae is associated with an increased risk of
     stroke and transient ischemic events.
CC
    Cardiovascular system - Blood vessel pathology
                                                      14508
    Nervous system - Pathology
                                  20506
    Medical and clinical microbiology - Bacteriology
IT
    Major Concepts
        Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection;
       Neurology (Human Medicine, Medical Sciences)
    Miscellaneous Descriptors
IT
       BACTERIAL DISEASE; CARDIOVASCULAR SYSTEM; CEREBROVASCULAR DISEASE;
       CHLAMYDIAL INFECTION; HOST; INFECTION; NERVOUS SYSTEM; NERVOUS SYSTEM
       DISEASE; PATHOGEN; PATIENT; TRANSIENT ISCHEMIA; VASCULAR DISEASE
ORGN Classifier
       Chlamydiaceae
                        07121
    Super Taxa
       Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;
       Microorganisms
    Organism Name
       Chlamydia pneumoniae
    Taxa Notes
       Bacteria, Eubacteria, Microorganisms
ORGN Classifier
       Hominidae
                    86215
    Super Taxa
       Primates; Mammalia; Vertebrata; Chordata; Animalia
    Organism Name
       human
```

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ANSWER 3 OF 33 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN
AN
     1997:68811 BIOSIS
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DN
     Association of chlamydial infection with cerebrovascular disease.
TΤ
     Wimmer, Martin L. J.; Strupp, Ruth Sandman; Saikku, Pekka; Haberl, Roman
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     Stroke, (1996) Vol. 27, No. 12, pp. 2207-2210.
SO
     CODEN: SJCCA7. ISSN: 0039-2499.
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     Article
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     English
     Entered STN: 11 Feb 1997
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     Last Updated on STN: 11 Feb 1997
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AB
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     infection. We investigated the frequency of chlamydial seropositivity and
     specific circulating immune complexes in patients with recent
     cerebrovascular disease. Methods: Specific antibodies to C. pneumoniae in
     serum were measured by the microimmunofluorescence test in 58 consecutive
     patients (aged 18 to 50 years) with ischemic infarction (n=39) or
     transient ischemic attacks (n= 19) and in 52 hospital control subjects
     without vascular disease, matched for sex, age, time, and locality.
     Results: Twenty-seven patients (46.6%) and 12 control subjects (23.1%) had
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     Specific IgG antibodies in circulating immune
     complexes, which were isolated by polyethylene glycol precipitation, were
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     (95% Cl, 1.08 to 2.70), 2.00 (95% Cl, 1.07 to 3.76), and 2.20 (95% CI,
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     infection with C. pneumoniae is associated with an increased risk of
     stroke and transient ischemic events.
     Cardiovascular system - Blood vessel pathology
CC
                                                      14508
     Nervous system - Pathology
                                  20506
     Medical and clinical microbiology - Bacteriology
IT
     Major Concepts
        Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection;
        Neurology (Human Medicine, Medical Sciences)
IT
     Miscellaneous Descriptors
        BACTERIAL DISEASE; CARDIOVASCULAR SYSTEM; CEREBROVASCULAR DISEASE;
        CHLAMYDIAL INFECTION; HOST; INFECTION; NERVOUS SYSTEM; NERVOUS SYSTEM
       DISEASE; PATHOGEN; PATIENT; TRANSIENT ISCHEMIA; VASCULAR DISEASE
ORGN Classifier
        Chlamydiaceae
                        07121
     Super Taxa
        Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria;
       Microorganisms
     Organism Name
        Chlamydia pneumoniae
     Taxa Notes
       Bacteria, Eubacteria, Microorganisms
ORGN Classifier
       Hominidae
                    86215
     Super Taxa
        Primates; Mammalia; Vertebrata; Chordata; Animalia
     Organism Name
       human
```

ANSWER 5 OF 33 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN AN 1994:33981 BIOSIS DN PREV199497046981 Past infection by Chlamydia pneumoniae strain TWAR and asymptomatic TT carotid atherosclerosis. ΑU Melnick, Sandra L.; Shahar, Eyal; Folsom, Aaron R. [Reprint author]; Grayston, J. Thomas; Sorlie, Paul D.; Wang, San-Pin; Szklo, Moyses Div. Epidemiol., Sch. Public Health, Univ. Minnesota, 1300 South Second CS St., Suite 300, Minneapolis, MN 55454-1015, USA American Journal of Medicine, (1993) Vol. 95, No. 5, pp. SO 499-504. CODEN: AJMEAZ. ISSN: 0002-9343. Article DTEnglish LA ED Entered STN: 27 Jan 1994 Last Updated on STN: 27 Jan 1994 AB PURPOSE: To determine whether past infection by Chlamydia pneumoniae strain TWAR is associated with asymptomatic atherosclerosis. Previous studies have linked this organism with symptomatic coronary heart disease. SUBJECTS AND METHODS: Between 1986 and 1989, 15,800 men and women aged 45 to 64 years were examined as part of the Atherosclerosis Risk in Communities Study, a prospective cohort study of atherosclerosis being conducted in 4 United States communities. The examination included B-mode ultrasonography of the carotid arteries and an assessment of cardiovascular disease risk factors. Carotid wall thickening (blood-intima to medial-adventitial interface) in the absence of clinical cardiovascular disease was considered evidence of asymptomatic atherosclerosis. In 1991, IgG antibody titers to TWAR were assayed by microimmunofluorescence in stored sera from 326 case-control pairs matched by age group, race, sex, examination period, and field center. A titer of 1:8 or higher was considered a positive TWAR antibody response. RESULTS: Seventy-three percent of atherosclerosis cases had serologic evidence of past TWAR infection versus 63% of controls (matched odds ratio 1.76; 95% confidence interval, 1.21 to 2.57). After adjustment for age, hypertension, diabetes, cigarette smoking, low-density lipoprotein cholesterol, high-density lipoprotein cholesterol, and education, the odds ratio for atherosclerosis was essentially unchanged at 2.00 (95% confidence interval, 1.19 to 3.35). The association was stronger for individuals aged 45 to 54 years than for those aged 55 to 64 years. CONCLUSION: There was a significant cross-sectional association between past TWAR infection and asymptomatic atherosclerosis. This organism may be a contributor to the pathogenesis of atherosclerosis. CC Pathology - Diagnostic 12504 Pathology - Therapy 12512 Cardiovascular system - Heart pathology 14506 Cardiovascular system - Blood vessel pathology 14508 Medical and clinical microbiology - Bacteriology IT Major Concepts Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection; Pathology IT Miscellaneous Descriptors CORONARY HEART DISEASE; DIAGNOSIS; PAST INFECTION; PATHOLOGY; RISK FACTOR ORGN Classifier Chlamydiaceae 07121 Super Taxa Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria; Microorganisms Organism Name Chlamydia pneumoniae

Taxa Notes

ORGN Classifier

Bacteria, Eubacteria, Microorganisms

ANSWER 5 OF 33 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN ΑN 1994:33981 BIOSIS DN PREV199497046981 Past infection by Chlamydia pneumoniae strain TWAR and asymptomatic TI carotid atherosclerosis. Melnick, Sandra L.; Shahar, Eyal; Folsom, Aaron R. [Reprint author]; ΑU Grayston, J. Thomas; Sorlie, Paul D.; Wang, San-Pin; Szklo, Moyses Div. Epidemiol., Sch. Public Health, Univ. Minnesota, 1300 South Second CS St., Suite 300, Minneapolis, MN 55454-1015, USA American Journal of Medicine, (1993) Vol. 95, No. 5, pp. SO 499-504. CODEN: AJMÉAZ. ISSN: 0002-9343. DT Article LA English Entered STN: 27 Jan 1994 ED Last Updated on STN: 27 Jan 1994 PURPOSE: To determine whether past infection by Chlamydia pneumoniae AB strain TWAR is associated with asymptomatic atherosclerosis. Previous studies have linked this organism with symptomatic coronary heart disease. SUBJECTS AND METHODS: Between 1986 and 1989, 15,800 men and women aged 45 to 64 years were examined as part of the Atherosclerosis Risk in Communities Study, a prospective cohort study of atherosclerosis being conducted in 4 United States communities. The examination included B-mode ultrasonography of the carotid arteries and an assessment of cardiovascular disease risk factors. Carotid wall thickening (blood-intima to medial-adventitial interface) in the absence of clinical cardiovascular disease was considered evidence of asymptomatic atherosclerosis. In 1991, IgG antibody titers to TWAR were assayed by microimmunofluorescence in stored sera from 326 case-control pairs matched by age group, race, sex, examination period, and field center. A titer of 1:8 or higher was considered a positive TWAR antibody response. RESULTS: Seventy-three percent of atherosclerosis cases had serologic evidence of past TWAR infection versus 63% of controls (matched odds ratio 1.76; 95% confidence interval, 1.21 to 2.57). After adjustment for age, hypertension, diabetes, cigarette smoking, low-density lipoprotein cholesterol, high-density lipoprotein cholesterol, and education, the odds ratio for atherosclerosis was essentially unchanged at 2.00 (95% confidence interval, 1.19 to 3.35). The association was stronger for individuals aged 45 to 54 years than for those aged 55 to 64 years. CONCLUSION: There was a significant cross-sectional association between past TWAR infection and asymptomatic atherosclerosis. This organism may be a contributor to the pathogenesis of atherosclerosis. CC Pathology - Diagnostic 12504 Pathology - Therapy 12512 Cardiovascular system - Heart pathology 14506 Cardiovascular system - Blood vessel pathology 14508 Medical and clinical microbiology - Bacteriology ·IT Major Concepts Cardiovascular Medicine (Human Medicine, Medical Sciences); Infection; Pathology ITMiscellaneous Descriptors CORONARY HEART DISEASE; DIAGNOSIS; PAST INFECTION; PATHOLOGY; RISK **FACTOR** ORGN Classifier Chlamydiaceae 07121 Super Taxa Chlamydiales; Rickettsias and Chlamydias; Eubacteria; Bacteria; Microorganisms Organism Name Chlamydia pneumoniae

Taxa Notes

ORGN Classifier

Bacteria, Eubacteria, Microorganisms

Hominidae 86215 Super Taxa Primates; Mammalia; Vertebrata; Chordata; Animalia Organism Name human Taxa Notes Animals, Chordates, Humans, Mammals, Primates, Vertebrates ANSWER 6 OF 33 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN L12 1994:27689 BIOSIS PREV199497040689 Antigen identification in drug-induced bullous pemphigoid. Smith, Eileen Pazderka [Reprint author]; Taylor, Ted B.; Meyer, Laurence J.; Zone, John J. Div. Dermatol., Univ. Utah Health Sci. Center, 50 North Medical Dr., Salt Lake City, UT 84132, USA Journal of the American Academy of Dermatology, (1993) Vol. 29, No. 5 PART 2, pp. 879-882. ISSN: 0190-9622. Article English Entered STN: 25 Jan 1994 Last Updated on STN: 26 Jan 1994 Immunobullous diseases usually develop spontaneously, but drug-induced bullous disease develops in a small subgroup of patients. We examined a patient in whom bullous pemphigoid developed after she received enalapril for treatment of hypertension. IgG antibody directed against a 230 kd antigen was identified. The eluted IgG autoantibody was shown to bind to the basement membrane zone on split skin. This study demonstrates that drug-induced bullous pemphigoid autoantibody in this patient was directed against the same antigen as the spontaneous bullous pemphigoid antigen. Biochemistry studies - General 10060 Biochemistry studies - Proteins, peptides and amino acids 10064 Integumentary system - Pathology 18506 Pharmacology - Cardiovascular system 22010 Toxicology - Pharmacology 22504 Immunology - Immunopathology, tissue immunology 34508 Major Concepts Clinical Endocrinology (Human Medicine, Medical Sciences); Dermatology (Human Medicine, Medical Sciences); Pharmacology; Toxicology Chemicals & Biochemicals ENALAPRIL Miscellaneous Descriptors ANTIHYPERTENSIVE AGENT; CASE STUDY; ENALAPRIL; IMMUNOGLOBULIN G AUTOANTIBODY; TOXICITY ORGN Classifier Hominidae 86215 Super Taxa

Primates; Mammalia; Vertebrata; Chordata; Animalia

Animals, Chordates, Humans, Mammals, Primates, Vertebrates

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Organism Name human Taxa Notes

75847-73-3 (ENALAPRIL)

Hominidae 86215 Super Taxa Primates; Mammalia; Vertebrata; Chordata; Animalia Organism Name human Taxa Notes Animals, Chordates, Humans, Mammals, Primates, Vertebrates

ANSWER 6 OF 33 BIOSIS COPYRIGHT (c) 2007 The Thomson Corporation on STN L12

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Antigen identification in drug-induced bullous pemphigoid. ΤI

ΑU Smith, Eileen Pazderka [Reprint author]; Taylor, Ted B.; Meyer, Laurence J.; Zone, John J.

Div. Dermatol., Univ. Utah Health Sci. Center, 50 North Medical Dr., Salt CS Lake City, UT 84132, USA

Journal of the American Academy of Dermatology, (1993) Vol. 29, SO No. 5 PART 2, pp. 879-882. ISSN: 0190-9622.

Article DT

English LA

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TΤ Major Concepts

> Clinical Endocrinology (Human Medicine, Medical Sciences); Dermatology (Human Medicine, Medical Sciences); Pharmacology; Toxicology

Chemicals & Biochemicals IT

ENALAPRIL

TT Miscellaneous Descriptors

> ANTIHYPERTENSIVE AGENT; CASE STUDY; ENALAPRIL; IMMUNOGLOBULIN G AUTOANTIBODY; TOXICITY

ORGN Classifier

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Organism Name

human

Taxa Notes

Animals, Chordates, Humans, Mammals, Primates, Vertebrates

RN 75847-73-3 (ENALAPRIL)

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ANSWER 34 OF 36
                    MEDLINE on STN
AN
     89350714
                  MEDLINE
DN
     PubMed ID: 2504137
ΤI
     Platelet aggregating activity in the plasma of patients with established
     thrombosis.
     Jackson S P; Salem H H
ΑU
     Department of Medicine, Monash Medical School, Prahran, Vic, Australia.
CS
     Australian and New Zealand journal of medicine, (1989 Apr) Vol. 19, No. 2,
SO
     pp. 126-31.
     Journal code: 1264322. ISSN: 0004-8291.
CY
     Australia
     Journal; Article; (JOURNAL ARTICLE)
DT
LA
     English
     Priority Journals
FS
     198909
EM
ED
     Entered STN: 9 Mar 1990
     Last Updated on STN: 9 Mar 1990
     Entered Medline: 8 Sep 1989
     This study examines the incidence and significance of novel plasma derived
AB
     platelet aggregating activity (PAA) in 190 consecutive patients admitted
     to the medical wards of a general hospital. Seventy five patients (39%)
     demonstrated this activity. The incidence was highest in patients with a
     history of thrombosis (52%) or in those with a heightened thrombotic
     tendency, for example, patients with diabetes or hypertension.
     In contrast, platelet aggregating activity was observed in six out of 62
     patients (approximately 10%) in whom a current or past medical history of
     thrombosis could not be elicited and in only two out of 72 healthy
     volunteers examined (3%). A high frequency of PAA was also noted in a
     small group of patients with idiopathic thrombocytopenia and patients who
     had previously received platelet transfusions. In these patients, this
     activity presumably reflects the presence of antiplatelet
     antibodies. A good correlation between the presence of plasma
     derived platelet aggregating activity and the phenomenon of spontaneous
     platelet aggregation was observed. The platelet aggregating activity was
     not heparin dependent, but was completely abolished by EDTA (5 mM) and
     benzamidine (8 mM), or by pretreating the platelets with aspirin. A
     synergistic response was observed with subaggregatory concentrations of
     thrombin and adrenalin. Our results suggest that the presence of this
     platelet aggregating activity may provide a marker for vascular
     thrombosis. Furthermore we postulate that this plasma derived activity
     may be partly responsible for platelet hyperactivity previously observed
     in patients with thromboembolic disorders.
CT
      Adult
      Aged
      Aspirin: PD, pharmacology
      Benzamidines: PD, pharmacology
      Blood Coagulation Factors: AN, analysis
      Edetic Acid: PD, pharmacology
      Humans
      Middle Aged
       *Platelet Activating Factor
     *Platelet Aggregation
      Platelet Aggregation: DE, drug effects
      Research Support, Non-U.S. Gov't
      Thrombocytopenia: BL, blood
      Thrombocytopenia: DT, drug therapy
     *Thrombosis: BL, blood
      Thrombosis: DT, drug therapy
      Time Factors
     50-78-2 (Aspirin); 60-00-4 (Edetic Acid)
RN
     0 (Benzamidines); 0 (Blood Coagulation Factors); 0 (Platelet
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